

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | NW | 76534 | 10/10/00 |
| O.I.P.E. CLASSIFIER | | 48 | 10/18/00 |
| FORMALITY REVIEW | CS | 804 | 11/06/00 |
| RESPONSE FORMALITY REVIEW | MIT | 549 | 12-15-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
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| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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